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Dixon, Louise; Browne, Kevin

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The heterogeneity of family violence and its implications for practice.

Louise Dixon and Kevin Browne

Centre for Forensic and Family Psychology
University of Birmingham

Abstract

Reviews on the causes of aggression in the family have emphasised the extensive overlap between all forms of partner violence and child maltreatment. However, research into family violence has often investigated child and partner maltreatment as separate entities, frequently examining the violent man in order to understand the correlates and potential causes of his violent behaviour within the family. This review highlights the importance of examining intimate partner violence within the context of the family. First the violent man is considered in isolation, exploring the heterogeneity of men who abuse and murder their female partner and the implications this has for future practice and research. Second, taking into account the overlap of partner and child maltreatment and the reciprocal nature of intimate partner violence, the utility of examining family violence from a more family focused perspective is considered. It is concluded that an integrated perspective will increase interagency collaboration and integrative treatment for the family.

Introduction

Violence between family members can take one of five forms. A broad perspective includes two forms of violence by adults (child and intimate partner abuse), two forms by children (sibling and parent abuse) and one form by both children and adults (elder abuse). Reviews on the causes of aggression in the family have emphasised the growing recognition that there are extensive overlaps between all forms of partner violence and child maltreatment as both are products of impoverished family relationships (Browne, 1995; Browne & Herbert, 1997). Nevertheless, violence in the home has been only recently highlighted as an issue that needs addressing within the context of public health care (British Medical Association, 1998; Gondolf, 1998; World Health Organisation, 2002).

Research into the intergenerational cycle of child maltreatment has found that intimate partner violence mediates the cycle (Dixon, Hamilton-Giachritsis & Browne, 2005). Thus it is important to prevent or intervene in violence perpetrated by adults in the family to reduce the risk of child maltreatment occurring and to ensure that children do not internalise violence as an acceptable means of interaction with others. In addition to perpetuating the cycle of family violence, intimate partner violence has grave social costs. Crime statistics for 2004-2005 in England and Wales showed that 32% of violent incidents against women and 6% against men were domestic in nature (Nicholas, Povey, Walker & Kershaw, 2005). Furthermore, homicide statistics for 2003/2004 in England and Wales showed that of 232 female victims 38% were killed by a partner or ex-partner in comparison to 5% of 601 male homicide victims (Povey, 2005). As these statistics and other research (e.g. Saunders 2002) demonstrate, female victims of domestic violence incur greater physical and psychological consequences than male victims. This has lead researchers to portray women as the primary victims of partner violence (Dobash & Dobash, 2004; Dobash, Dobash, Wilson & Daly, 1992). Indeed, research into intimate partner violence has often investigated the violent man to understand the correlates and potential causes of his violent behaviour.

However, assertions about the consequences of intimate partner violence should consider research that has examined the phenomenon in a systematic manner which has not always been the case. For example, the work of Dobash et al (1992) can be criticised for providing an ideologically biased narrative review, rendering its conclusions unsound. In contrast, Archer (2000) provides a systematic investigation into the claim that there are greater physical consequences for women victims than men. His meta-analytic review demonstrates that whilst women are injured more often than men, men constitute approximately one third of those injured. Furthermore, the reciprocity of violence in some relationships has been highlighted, as aggressive acts are perpetrated in same sex relationships (Island & Letellier, 1991) and from woman to man (Archer, 2000, 2002; Straus, 1997, 1999). Approximately 100 research studies have documented rates of partner violence to be equal for both men and women (for example see Archer, 2000, 2002; Fiebert, 2001; Straus, 1997, 1999) and 'reciprocal' (Appel & Holden, 1998) and 'common couple' partner violence (Johnson, 1995) has been documented.

In response to the above considerations this paper will first consider the violent man in isolation, exploring the heterogeneity of men who abuse their female partner and the implications this has

for future practice and research. Second, taking into account the overlap of various forms of family violence and the reciprocal nature of intimate partner violence, the utility of examining family violence from a more family focused perspective is considered.

The heterogeneity of intimate partner violence

For over three decades research has found that men who are violent to their female partner are a heterogeneous group, demonstrating distinct characteristic differences (e.g. Faulk, 1974; Gondolf, 1988; Holtzworth-Munroe & Meehan, 2004; Saunders, 1992). As a result research has attempted to develop classification systems of maritally violent men. Holtzworth-Munroe and Stuart (1994) constructed a hypothetical typology to discriminate between subtypes of domestic violent men living in the community. From a review of the literature, the authors concluded that three descriptive dimensions of the severity of violence, the generality of violence and psychopathology/personality disorder differentiate between men. Three types of domestic violent men were proposed, namely; Family Only (FO), Generally Violent/Antisocial (GVA) and Dysphoric/Borderline (DB). A model of distal and proximal etiological variables was also proposed to explain the development and characteristic differences of each subtype. Holtzworth-Munroe and Stuart (op. cit.) proposed that 50% of domestic violent men will be best described by the FO subgroup, 25% by the GVA subgroup and 25% by the Dysphoric/Borderline subgroup.

Family Only offenders were hypothesised to most closely resemble non-violent comparison groups, having low levels of criminality, alcohol and drug abuse and infrequent use of violence, which would be limited to family members and be of low severity. Their violence is assumed to occur from a combination of low level risk factors, such as poor communication skills with their partner, mild impulsivity and dependency on their partner.

The GVA subtype is hypothesised to have low levels of psychological distress and depression alongside moderate levels of anger. The interpersonal relationships of the GVA group are characterised by a dismissive attachment style and is characterised by the highest levels of impulsivity, antisocial personality, substance abuse and criminality, committing moderate to severe levels of violence both within and outside of the family unit.

The DB sub-type is hypothesised to be the most psychologically distressed and emotionally volatile, evidencing characteristics of borderline personality and high levels of dependency on

and preoccupation with intimate partners, reacting with anger when they feel rejected, abandoned or slighted. They are also most likely to display high levels of depression and anger and low-moderate levels of criminality and substance abuse. Violent acts are hypothesised to be of moderate-high severity and limited mainly to family members.

Initial support has been gathered for Holtzworth-Munroe and Stuart's (1994) typology. Research published after their review has generally supported the typology, either identifying the GVA and DB offenders (Chase, O'Leary & Heyman, 2001; Gottman et al, 1995; Tweed & Dutton 1998) or all of the three proposed sub-types (Hamberger, Lohr, Bonge & Tolin, 1996; Waltz, Babcock, Jacobson & Gottman, 2000; White & Gondolf, 2000). Furthermore, Holtzworth-Munroe, Meehan, Herron, Rehman & Stuart (2000) tested their typology on a community sample of 102 men who had been violent toward their intimate partner during the previous 12 months. Cluster analysis revealed four types of men; the three originally predicted sub-types (FO, n=37; DB, n=15; GVA, n=16) who differed as hypothesised and a low-level antisocial type (LLA, n=34) who fell intermediate to the GVA and FO groups on several measures.

Dixon and Browne (2003) compare Holtzworth-Munroe and Stuart's (1994) theoretical classification to nine empirical research studies and two hypothetical studies, which can be found in the literature dated from 1994 onwards. The review provides support for the three-fold typology, with the total averages of offenders classified by the typology across the studies at 50%, 30% and 20% for the FO, GVA and DB subgroups respectively. However, when the authors investigated the effect of sample type on the prevalence of subgroup, a significant difference between men who had been referred by the courts to treatment and those who had volunteered for treatment was found. Court referred men were significantly less likely to be categorised into the Family Only group than volunteers, with 38% of the sample being classified into FO, 36% GVA and 24% DB groups. This is in comparison to 59% of volunteers classified by FO, 23% GVA and 16% DB. Thus, it is proposed that differences in court and volunteer referrals need to be taken into account when considering therapeutic effectiveness.

Classifying intimate partner femicide

Research investigating the most severe form of partner violence, intimate partner femicide, has reliably found identifiable differences between lethal and non-lethal partner assault (Campbell et al, 2003; Dutton & Kerry, 1999) which has played an important role in the development of risk assessment tools (Bixenstine, 1999; Campbell, 1995). However, a large proportion of femicide

cases occur in the context of previous partner violence, with studies reporting victims in 65-85% of cases being abused by the same perpetrator prior to their death (Campbell et al, 2003; 2004; Moracco, Runyan & Butts, 1998). Therefore, it is plausible that the main characteristics thought to define types of domestic violent men in the community are representative of men committing lethal domestic violence. However, research has not empirically tested the prevalence of the various types of men identified by Holtzworth-Munroe and Stuart (1994) in a sample of men convicted for the murder of their female partner.

There are few studies that provide information on the type of men who murder their female intimate partner and those that do often contradict each other. Longitudinal research suggests the FO offender does not escalate his levels of violence and is most likely to stop being violent over time (see Holtzworth-Munroe & Meehan, 2004). As Campbell (1995) identified that an increase in severity and frequency of violence is associated with increased risk of femicide, it is plausible that FO men are less likely to murder their female partner than other sub-types. Saunders & Browne (2000) suggest that the DB offender is most at risk of killing his partner, despite their previous findings which show this offender's relationship violence to be of low severity (Saunders, 1992). However, other research reports contrary findings, suggesting that both the GVA and DB offenders display moderate to severe partner assault (Holtzworth-Munroe & Meehan, 2004; Holtzworth-Munroe, Meehan, Herron, Rehman & Stuart, 2000) and thus could both potentially be at high risk of committing femicide.

Due to the lack of knowledge surrounding the issue of which types of men will murder their female partner, Dixon, Hamilton-Giachritsis and Browne (2008) used a multidimensional approach to empirically construct a classification system of men convicted and incarcerated for the murder of their female partner, based on the Holtzworth-Munroe and Stuart (1994) typology. Institutional records of ninety men, identified from two English prison samples, were analysed systematically for variables relating to two dimensions of Psychopathology and Criminality. These variables were analyzed for thematic structure using multidimensional scaling procedures and the resultant framework classified 80% (n=72) of the sample into three sub-groups of men characterised by Low Criminality/Low Psychopathology (15%); Moderate-High Criminality/High Psychopathology (36%) and High Criminality/Low-Moderate Psychopathology (49%). The 'Low Criminality and Low Psychopathology' theme accounted for a minority of cases and whilst this dimensional profile is similar to the FO offender, proposed by Holtzworth-Munroe and Stuart (1994), the offences were specifically characterised by

instrumental attacks in the absence of any history of violence with the victim or other intimate partners in the past. These offenders would not appear in a non-lethal classification of partner violence and therefore, it is hypothesised that these cases are specific only to intimate partner femicide. The latter two groups are akin to Holtzworth-Munroe and Stuart's (1994) GVA and DB offender respectively and thus suggests that men characteristic of these offenders will be most likely to commit femicide. The high frequency of men classified by the High Criminality/Low-Moderate Psychopathology region is contrary to work by Saunders and Browne (2000) who propose that men resembling the DB category will be most at risk of murdering their partner. However, it must be noted that as a high percentage of men resembling the DB profile are likely to commit femicide suicide (Dutton & Kerry, 1999) they may be underrepresented in a prison sample.

Classification systems of offenders can play an integral role in the development of risk assessment and prediction of treatment efficacy, with researchers utilising the derived typologies of men to identify and predict which types of offenders are most likely to benefit from specific intervention programmes (Dutton et al, 1997; Jones & Gondolf, 2000; Saunders, 1996). Indeed, researchers advocate that the effectiveness of intervention programmes for domestic violent men are not impressive (Babcock, Green & Robie, 2004; Holtzworth-Munroe and Meehan, 2004; Rosenfeld, 1992). However, some research has shown that the efficacy of programmes increases when intervention type is matched to offender type (e.g. Saunders, 1996). As Saunders and Browne (2000) report, men incarcerated for partner femicide do not usually receive a domestic violence based intervention in prison, especially if the case is seen as an isolated crime of passion. This thesis demonstrates that men who murder their partner share a similar profile to the GVA and DB men committing non-lethal partner violence in the community, outlined by Holtzworth-Munroe and Stuart (1994). Thus, it is suggested that men entering prison settings for such domestic crimes should be encouraged or mandated to undergo an empirically based intervention suitable to their individual type. However, whilst this study found perpetrators analogous to the DB and GVA offenders to predominate in femicide cases, this was the first study of its kind, using a small group of English cases. Research would benefit from longitudinal, cross-cultural studies to assess typologies of men and their behaviour over time and to prospectively examine which men go on to murder their intimate partner.

Patterns of family violence

Empirical research has consistently demonstrated the co-occurrence of partner and child maltreatment within the family (Bowen, 2000; Cox, Kotch & Everson, 2003; Hayzen, Connelly, Kelleher, Landsverk & Barth, 2004), with co-occurrence rates estimated between 30-60% (Appel and Holden, 1998; Browne & Hamilton, 1999; Edleson, 1999). Furthermore, research has shown that violence and injury to both the partner and child is more severe where both forms of abuse co-exist in the family and are thus deemed to be more in need of services (Beeman, Hagemeister, Edleson, 2001; Browne & Hamilton, 1999).

Whilst research has investigated the co-occurrence of different forms of maltreatment within the family, the majority of studies examine the aetiology, maintenance and intervention of partner and child maltreatment separately, treating them as discrete entities. Typology research may therefore be criticised for its narrow focus on the male offender without considering other factors such as the family context and behavioural actions of the victim. Some researchers have stipulated aggression in the family is a product of the person – environment interaction (Frude, 1991). Indeed, research at a dyadic level has shown that the interaction between two people in a violent exchange is an important determinant of behaviour. For example, abused wives often reciprocate with negative behaviours in a violent interaction (Holtzworth-Munroe, Smutzler & Bates, 1997) and Bartholomew, Henderson and Dutton (2001) report different patterns of violence between couples as a result of the interacting attachment styles. Furthermore, the child abuse literature denotes that child characteristics, such as difficult temperament, behavioural problems and mental/physical disabilities are associated with parental aggression toward the child (Wolfe, 1987).

Minuchin (1974) takes a broad approach to the understanding of family violence, adopting a family systems perspective which considers each member of the family contributing to the probability of violence occurring. Individuals are therefore not viewed as simply passive recipients of abuse; rather they are seen as part of a dynamic process that changes the chances of aggression occurring within the family unit (Hughes & Fantuzzo, 1994). Such approaches to the understanding of family violence are considered more promising for prevention of maltreatment in comparison to those aimed at individual psychopathology (Cahn, 1996). It is therefore important to determine that a holistic approach is valid by demonstrating the existence and differences between patterns of family violence.

Dixon and Browne (2003) proposed three hypothetical patterns of co-occurring abuse in the family. In the Paternal pattern the violent husband is seen as the main perpetrator within the family unit. In some instances the child may also abuse the mother seeing her as powerless. In the Hierarchical pattern family violence involves a hierarchy of violence where the father is abusive to the mother and the mother maltreats the child, but does not retaliate toward the father. In some cases the father may also abuse the child. Finally, the Reciprocal pattern is characterised by reciprocal spouse abuse, with both parents having the potential to abuse and/or neglect their child. Indeed, the potential to emotionally abuse the child through witnessing partner abuse is high. In all of the scenarios, it is suggested that children require support and intervention as victims of family violence.

Dixon, Browne, Hamilton-Giachritsis and Ostapuik (submitted) investigated the feasibility and prevalence of the patterns of family violence hypothesised by Dixon and Browne (2003) in a sample of maltreating families. Psychological report information on 162 parents, alleged to have maltreated their child, was examined. It was found that of the sample, 104 (64.2%) parents resided in an abusive family with concurrent intimate partner and child maltreatment and of these families 47 (45.2%) parents were characterised by Hierarchical; 43 (41.3%) Reciprocal and 14 (13.5%) Paternal family violence. Thus, demonstrating the existence of the different patterns of family violence and supporting the utility of a holistic approach to family violence in both research and practice.

Examining domestic violent offenders within the context of the family as a whole is important if cycles of aversive family interactions are to cease. It is important to accurately understand and assess the risk that a spouse-abusing male will pose to his children or the risk that a victimised female will pose to her children post-separation from the violent partner. This study highlights that parents who maltreat their child can have very different treatment needs. For example, the treatment needs of a mother residing in a Hierarchical family, who is a victim of partner violence and perpetrator of child maltreatment, is one of both a victim and offender. This is in comparison to a mother who can be seen solely as a victim in a Paternal pattern or as a perpetrator in the Reciprocal pattern. In Reciprocal families the mother's partner violence needs to be addressed, in addition to the father's, rather than simply viewing her as a victim of his violence. For those couples that wish to stay together, intervention may focus on relationship counselling or family therapy in addition to parenting skills and programmes that will address their aggression, such as

anger management. It is not sufficient to evaluate intervention on the basis of occurrence or non-occurrence of physically violent behaviour as any other forms of maltreatment co-exist or replace aggression. Helping family members to inhibit physical violence towards each other and their dependants may still leave unchanged the emotionally harmful environment in which the initial abuse occurred. Therefore, work on interpersonal relationships is essential if prevention of family violence is to be achieved.

Conclusions

This review has highlighted the importance of not only considering characteristics of the domestic violent man but also the worth of examining intimate partner violence within the context of the family. An integrated perspective of child and partner maltreatment will enable professionals to gain a better understanding of the aetiology and maintenance of violence and the best ways in which to prevent it and intervene with individuals living in a violent family.

Furthermore, an integrated perspective will increase interagency collaboration and integrative treatment for the family. Indeed, multi-agency work has been shown to be the most effective in the prevention of all forms of family violence. As Osofsky (2003) states “the necessary integration of this perspective into the work of law enforcement, the judicial system and social service providers has not yet occurred” (p161). Indeed, research examining police recognition of the links between spouse and child abuse demonstrated a lack of referral between Child Protection Units and Domestic Violent Units (Browne & Hamilton, 1999), highlighting a partnership gap. Within each community, domestic violence and child maltreatment occur in the context of complex interactions between institutional, social and individual factors (Peled, Jaffe and Edleson, 1995). Hence, effective intervention must involve co-operation at all levels between and within health, social welfare, educational, legal and law enforcement systems (Office of the Tanaiste, 1997; World Health Organisation, 1998, 2002).

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